RENTAL OCCUPANCY PERMIT APPLICATION

City of Fairfax, Fire & Rescue Fee: \$150.00 Office of Code Administration Permit No.____ 10455 Armstrong St Fairfax, Virginia 22030 Issued: (703-385-7830) INSTRUCTIONS: Please print legibly in ink. Make a check payable to the City of Fairfax for the amount of \$150.00, and mail or bring the completed application and payment to the address above. A separate application is required for each rental unit. For more information or assistance call 385-7830. RENTAL PROPERTY ADDRESS:______ IN SUBDIVISION_____ NAME OF OWNER OWNER ADDRESS PHONE _____ NAME OF RENTAL/MAINTENANCE AGENT (if any) ADDRESS PHONE **CERTIFICATE** I (owner/agent) certify that the property will be rented only for occupancy by a "family unit" as defined by the Zoning Ordinance of the City of Fairfax, Virginia, Section 110-4. I further certify that I have read and understand the attached Manual for Rental Property Owners and that the property complies with all applicable State and local regulations, including the Building Code, Fire Prevention Code, Health, Safety and Sanitation Ordinance, Housing Standards and Zoning Ordinance. I understand that the code official shall inspect the dwelling unit, grounds, and accessory structures: 1) following application; 2) upon change of tenancy; 3) every five years if there has been no intervening inspection; and 4) as response to a valid complaint. I understand that the rental property occupancy permit may be revoked if the property does not comply with the applicable codes. Signature of Property Owner/Agent Date NOTE: Office Use Only Substantiated reports of conduct on the subject property by Receipt No. tenants or their guests in violation of any provision of Chapter 14 Date: _____ Initials _____ (Misdemeanor Offenses) on two or more occasions within six months may result in the revocation of a Rental Occupancy Permit Approved by: